

Utah Health Information Technology Strategic Plan 2016-2020

A Collaborative Planning Document

By

Utah Digital Health Service Commission (UDHSC)

Comagine Health – Utah

Utah Health Information Network (UHIN)

Utah Partnership for Value-driven Health Care (UPV)

Utah Department of Health (UDOH)

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Updated July 2018

Updated July 2019

Health and Health Information Technology (IT) Visions

[Our statewide health vision](#) is for Utah to be a place where *all* people can enjoy the best health possible, where *all* can live and thrive in healthy and safe communities. <https://health.utah.gov/>

[Our statewide vision for health IT](#) is for Utah to be a place where the secure and efficient use and exchange of electronic health information will result in improved health status, better health care, lower cost and healthier communities.

Health IT Guiding Principles

Utah has made significant progress in adoption electronic health records (EHR) and clinical health information exchanges (HIE) since 2005. In 2016-2020, Utah will move forward under following **guiding principles**:

- Continue to foster *statewide collaboration* with all partners
- *Leverage the market* and existing HIT infrastructures
- Encourage interoperability and portability across care settings through *multi-level or modular advancements*
- Protect *privacy and security* in all aspects of IT and its uses
- Enhance *consumer engagement*
- Share meaningful health information among *learning health systems* to ensure innovation, quality, safety and value in health care.
- Using health IT to strengthen health of individuals, families, communities and add value to Utah's economy.

State HIT Plan History

- 2013 – State Innovation Model Grant funded planning for statewide IT initiatives. Commission's chair co-chaired these efforts
- 2015 – Commission updated the Utah Health IT Vision, Principles and Priorities
- 2016 – the Commission led the developed and oversight of the first Utah's Health IT Strategic Plan (2016-2020) as well as Performance measures
- 2017 – Updated State HIT plan to align with ONC National HIT Strategic Plan
- 2018 – Updated plan with current and potential projects and established goal review and measurement dashboard cycle.
 - January - Goal deep dive
 - March – Review dashboard and plan changes
 - May – Goal deep dive
 - July - Vote on plan changes, Goal deep dive
 - August – UDOH presents HIT plan to Medicaid for inclusion in Medicaid updates
 - September – Review dashboard
 - November - Goal deep dive
- 2019-Reviewed each goal, objective, and project

Priority Framework for Health IT

Utah health IT priority is to improve system interoperability and portability to support integration of physical and behavioral health care and improve population health for all Utahans.

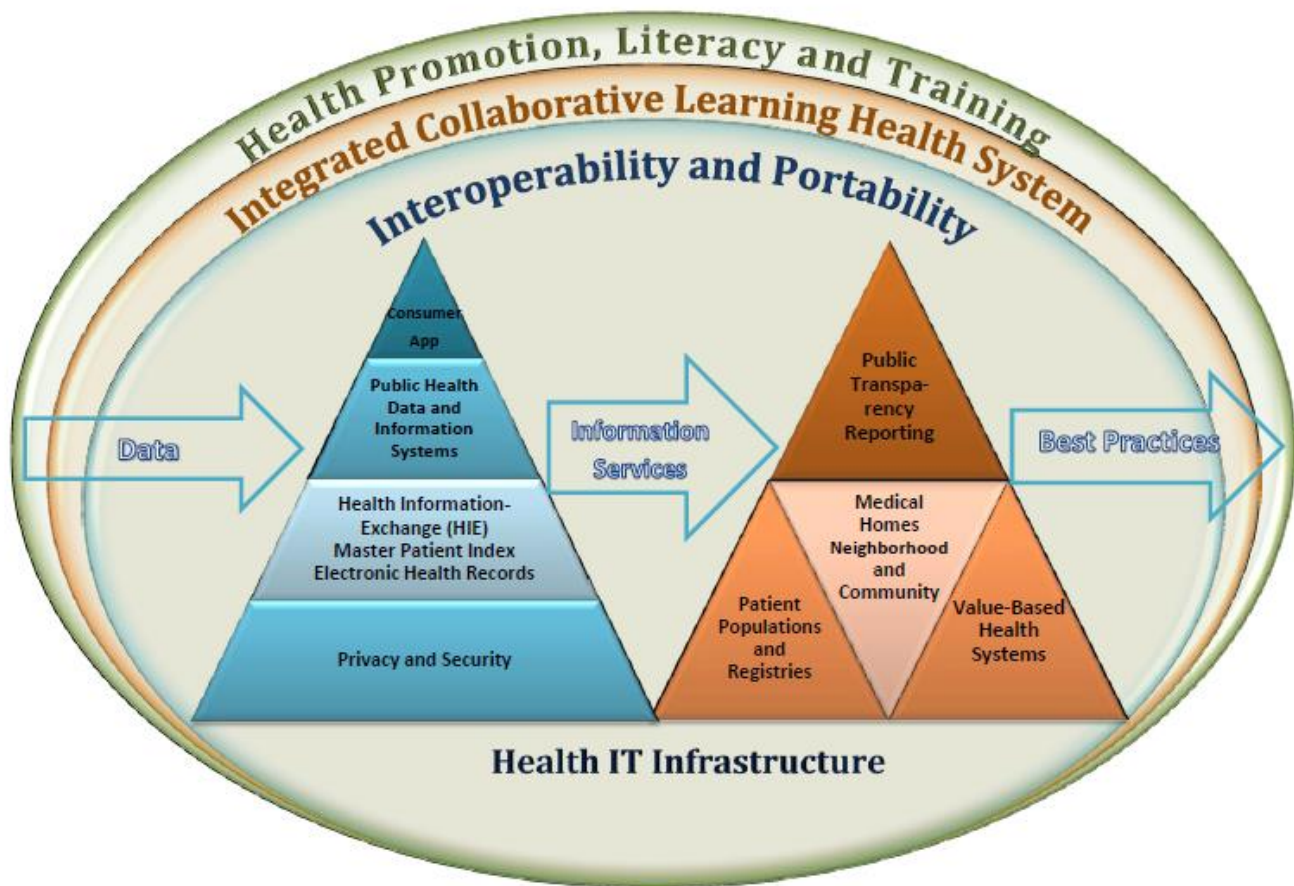
The Priority Framework of Health IT for Population Health and a Statewide Learning Health System in Utah (See Figure 1) describes the relationship of various health IT components, health data uses and statewide initiatives as follows:

- The left pyramid includes core IT applications that were identified in our statewide IT architecture design for 2009-2014 efforts.
- The Health IT systems provide information services for multi-level information uses ranging from care provided in medical home, neighborhood and communities to patient registries, value-based health systems, as well as public transparency reporting (the right pyramid).
- Interoperability and portability are key functions among all IT applications and infrastructure, services, and connections to health data users.
- Health IT must support an integrated collaborative learning health system.
- Health IT must improve efficiency of health promotion and enhance health IT literacy and training.

Education

Members of the Digital Health Service Commission will consider a process to help inform and better prepare both the public and health care providers on how to more fully access and use these resources that result from the plan projects.

Figure 1. Priority Framework of Health IT for Population Health and a Statewide Learning Health System in Utah



Utah Health IT Status:

Below is summary information on Utah statewide health IT performance in comparison with the national average. The data source for these indicators is from the web site of U.S. Department of Health and Human Service National Office of Coordinator for Health IT at <http://healthit.gov>.

Utah Health IT Status and Alignment with the Office of the National Coordinator in 2018

The national direction for Health Information Technology advances interoperability and encourages provider connectivity with others as a core metric in the 2018 CMS Quality Payment Program (QPP). "Promoting Interoperability (PI)" focuses on "interoperability, improving flexibility, relieving burden". See <https://qpp.cms.gov/mips/promoting-interoperability>.

As of Summer 2018 the initial submissions to the QPP by providers for 2017 are final and we anticipate high-level if not state by state benchmarks on participation. This document will be updated as national benchmarks occur to further inform Utah's participation and any gaps that may be addressed by the State HIT plan.

Utah Health IT Summary

This table shows how Utah compares to the national average on measures of HIT adoption and utilization that have been updated within the past two years. Data was obtained from the Office of the National Coordinator (<https://dashboard.healthit.gov/apps/health-information-technology-data-summaries.php>). While Utah appears to be performing well regarding hospital adoption of health IT, office physician adoption of health IT appears to be lagging.

Utah Health IT Summary				Recent		
Domain	Setting	Measure	Year	Natl Avg	Utah	Compare
EHR Adoptions	Hospitals	Adopted Certified EHRs	2017	96%	97%	↑
	Physicians	Adopted Any EHRs	2017	86%	94%	↑
	Physicians	Adopted Certified EHRs	2017	80%	85%	↑
Certified IT Vendors	Hospitals	Reported Certified Health IT Vendor(2014)	2017	96%	95%	↓
	Professional	Reported Certified Health IT Vendor(2014)	2017	81%	71%	↓
Electronic Prescribing		No recent data				
Exchange & Interoperability	Hospitals	Electronically Send from Outside Health Providers	2017	88%	91%	↑
	Hospitals	Electronically Receive from Outside Health Providers	2017	74%	82%	↑
	Hospitals	Electronically Find from Outside Health Providers	2017	61%	84%	↑
	Hospitals	Electronically Integrate from Outside Health Providers	2017	53%	79%	↑
	Hospitals	All Domains Electronically from Outside Health Providers	2017	41%	75%	↑
	Physicians	Electronically Send from Outside Health Providers	2017	36%	25%	↓
	Physicians	Electronically Receive from Outside Health Providers	2017	38%	31%	↓
	Physicians	Electronically Find from Outside Health Providers	2017	53%	49%	↓
	Physicians	Electronically Integrate from Outside Health Providers	2017	28%	22%	↓
	Physicians	Electronically Send or Receive from Any Health Provider	2017	46%	43%	↓
	Physicians	Electronically Send from Any Health Provider	2017	36%	25%	↓
	Physicians	Electronically Receive from Any Health Provider	2017	38%	31%	↓
HITECH Programs		No recent data				
Patient Engagement	Hospitals	Provided Electronic Capabilities to Patients-API Access	2017	38%	54%	↑
	Physicians	Secure Messaging	2017	68%	65%	↓
Public Health Reporting		No recent data				

Utah Health IT Strategic Goals and Objectives in 2016 - 2020:

GOAL 1: ADVANCE THE HEALTH AND WELL-BEING OF INDIVIDUALS AND COMMUNITIES THROUGH PERSON-CENTERED AND SELF-MANAGED HEALTH

OBJECTIVES:

- 1A.** Increase use of individual health information for engagement and shared decision making as part of the team – Enable individuals to understand and act upon available cost and quality information
- 1B.** Advance individuals' abilities to "access, control and amend" their health information
- 1C.** Increase adoption and use of patient portals and consumer-focused HIT
- 1D.** Promote patient education and use of HIT tools for wellness and self-care
- 1E.** Increase effective patient/consumer-mediated and generated exchange
- 1F.** Advance individual's access to and appropriate sharing of public health data

GOAL 2: STRENGTHEN HEALTH CARE DELIVERY TRANSFORMATION

OBJECTIVES:

- 2A.** Increase HIT functions to support transparency of and access to quality and cost information at the community and provider level to improve care
- 2B.** Increase implementation of HIT functions to support innovative models of care that promote high-value health care – Medical Home, ACOs, Telehealth
- 2C.** Increase use of electronic quality improvement tools and measurements that support provider adherence to evidence-based guidelines, improved outcomes and reduced waste
- 2D.** Support the use of health IT to help providers and communities to better serve high-risk individuals and populations

GOAL 3: ENHANCE UTAH'S INTEROPERABLE HEALTH IT INFRASTRUCTURE

OBJECTIVES:

- 3A.** Endorse basic guidelines for HIT standards that align with and strengthen national certification requirements, including interoperability, to increase effective health information exchange
- 3B.** Protect privacy and security of electronic health information by increasing adherence to federal electronic health information security guidelines in independent facilities and practices
- 3C.** Increase functionality and effectiveness of state-wide HIE (CHIE) and support increased connections with other data sources including integrated delivery systems (IDS), HIEs, and providers.
- 3D.** Increase ability to exchange public health information with providers through various exchange methods to improve population health
- 3E.** Develop governance, access, and support for health data to be made available for analysis and use
- 3F.** Increase Utah's influence on the national forums related to effective delivery of care through HIT
- 3G.** DHSC will attend conferences to promote interoperability work.

GOAL 4: SUPPORT INNOVATION AND APPLIED RESEARCH TO EFFICIENTLY IMPLEMENT STATEWIDE HEALTH IT INITIATIVES

OBJECTIVES:

- 4A.** Promote collaborative innovation and research to advance implementation, utilization and improvement of health IT in public, private and academic settings
- 4B.** Broaden statewide partnership and engagement in implementing the Utah HIT strategic plan
- 4C.** Disseminate evidence-based best practices to enhance statewide adoption of technology solutions

Definitions of ACTIONS:

Expansion- A project currently implemented but needing to expand to a larger audience or expand services.

Gap- No identified state level activities.

Implementation- A project that has designated resources and defined scope and is in progress.

Needs resources- A project that has been either planned and/or implemented but needs additional resources to move forward.

Planning- A project in concept development but lacks resources to advance to implementation or expansion status.

Descriptions of Projects/Strategies:

PROJECTS FOCUSED ON PATIENT KNOWLEDGE AND INVOLVEMENT

1. APCD (Price Transparency) & NRHI Total Cost of Care

Action: Implementation **Primary:** UDOH- OHCS, Comagine Health

Goals/Objectives Supported: 1A, 2A

To increase transparency reporting on healthcare quality and cost using the All Payer Claims Data or Total Cost of Care Data. (Baseline online report = 2; Baseline online query tool = 2)

2. UtahHealthScape.org (Transparency for Consumers)

Action: Implementation **Primary:** Comagine Health, UDOH-OHCS

Goals/Objectives Supported: 1A, 2A UtahHealthScape.org provides health care consumers with resources to support informed decision-making. UtahHealthScape provides a directory of providers and clinics and quality ratings for hospitals, health plans, nursing homes, and home health agencies, along with other valuable information.

3. Comagine Health's Patient & Family Advisory Council and state-wide PFAC Consortium

Action: Expansion **Primary:** Comagine Health

Goals/Objectives Supported: 1A, 1C

Comagine Health's Patient & Family Advisory Council (PFAC) helps us better understand the health care system from the patient's viewpoint. Patients, families and caregivers participating in the PFAC share their personal stories and health care experiences. This patient input is important in influencing how we design our projects to make our health care system better. We believe that patient wisdom is a "must have" factor in improving health care. Comagine Health convenes patient and family advisories throughout the state and HIT is a topic of interest, specifically Open Notes and portal use, for engagement and efficiency of care.

4. ePOLST Analysis and Implementation

Action: Planning **Primary:** UDOH, UHIN

Goals/Objectives Supported: 1A, 1B, 1C

Consensus built stakeholder recommendations on how to move forward in establishing an ePOLST registry, supporting the registry and implementing it throughout the state.

5. Planning project for 1D - Promote patient use of HIT

Action: Gap **Primary:** UDOH

Goals/Objectives Supported: 1D

Recognize gap. No current activity at this time.

6. Planning project for 1E - Consumer-mediated/generated exchange

Action: Implementation Primary: UHIN

Goals/Objectives Supported: 1E

CHIE has a limited pilot on the patient portal with planned expansion.

7. CHIE Patient Portal

Action: Expansion Primary: UHIN

Goals/Objectives Supported: 1A, 1B, 2C

This is an ONC grant item that created a patient portal that has access to the CHIE and allows for patient to share information with their provider. Planning to add ePOLST and Pediatric Care Summary data for patient access. Future roadmap items include benefit information, immunizations and care plans.

8. Open Notes Campaign

Action: Need Resources/Implementation Primary: UPV-Comagine Health, UHIN, UHIMSS

Goals/Objectives Supported: 1A, 1B, 1C, 1E, 3C

Open Notes is a movement that urges doctors, nurses, therapists, and others to invite patients to read the notes they write to describe a visit through sharing from an electronic health record portal. Utah has a number of systems using electronic health records that can make notes available. Initiatives to increase patient awareness and use can impact patient safety as well as trust between providers and patients. Goal is to increase participants in the Open Notes Initiative.

9. Patient Consent

Action: Planning Primary: UHIN

Goals/Objectives Supported: 1A, 1C, 1E, 2B, 3C

Develop patient consent tools for consent designation for sharing information across HIPAA and non-HIPAA providers.

PROJECTS FOCUES ON HEALTH CARE DELIVERY TRANSFORMATION

10. Provider Support for Quality Reporting (PQRS, MU, MACRA)

Action: Implementation Primary: Comagine Health and UHIN

Goals/Objectives Supported: 1C, 1A, 2B

Comagine Health gives quality improvement support to Utah physician offices and hospitals on reporting and improving quality measures. Specific emphasis on the Quality Payment Program (QPP), Accountable Care Organizations (ACOs), other Alternative Payment Models (APMs), behavioral health care and Ambulatory Surgical Center care are a focus for improvement efforts and improving outcomes. UHIN is working with providers to meeting Meaningful Use requirements and assist with criteria for QPP and is evaluating whether to assist members with reporting.

11. EHR Guide for Quality Reporting

Action: Implementation Primary: UDOH-EPICC, Comagine Health

Goals/Objectives Supported: 2A, 2C

Quality Data for Beginners: Using your Electronic Medical Record for Quality Reporting and Better Patient Care has been updated in 2017 to encompass cardiac measures and provides guidance for

success in quality reporting for primary care practices. *(Subcontract to Comagine Health, under UDOH CDC 1422 funding)*

12. GetHealthyUtah.org (Population Health)

Action: Implementation **Primary: Utah Leaders for Health**

Goals/Objectives Supported: 2B, 2C, 2D

To improve the health of all Utahns by supporting healthy eating and active living in order to associated health consequences.

13. Death Notifications

Action: Expansion **Primary: UDOH**

Goals/Objectives Supported: 2B, 2D

To develop timely notifications of deceased patients or members to providers and payers for them to improve their population health data.

14. Long-Term/Post-Acute Care Summary Exchange

Action: Expansion **Primary: UHIN**

Goals/Objectives Supported: 2B, 3C

This is an ONC project intended to exchange CCD documents between hospital and long term care providers. The pilot effort included Avalon and Intermountain Healthcare. The expansion effort is to include all LTCs and Hospitals.

15. Dashboards (HIT, NQF, Monarch) for Geographic Quality Analysis

Action: Expansion **Primary: UHIN**

Goals/Objectives Supported: 2C, 2D

This project intends to provide hot spotting to providers for their patient panels and for public health reporting. There are currently 36 measures contained in the system.

16. Adult Immunizations - increase rates (flu, pneumonia)

Action: Implementation **Primary: Comagine Health, UDOH-USIIS**

Goals/Objectives Supported: 2C

Working with organizations to help improve the assessment and documentation of Medicare beneficiaries' immunization status, increase overall immunization rates and reduce immunization disparities.

17. Comagine Health's Quality Awards Program

Action: Expansion **Primary: Comagine Health**

Goals/Objectives Supported: 2B, 2C

The Comagine Health Quality Award Program was launched in 2004 to promote high quality and transparency in health care. Yearly awards are given to Utah health care provider organizations based on standardized criteria (including Health IT) in the following areas:

- Home Health
- Hospital
- Nursing Home
- Physician Office

18. ADT Alerts for reducing admissions and readmission

Action: Expansion **Primary: UHIN**

Goals/Objectives Supported: 2B, 2D, 3C

Encounter Notification Services for the community and pushing those to different endpoints to rural and out of state providers.

19. Clinical information exchange among public health, EHRs, and HIE

Action: Expansion **Primary:** UDOH-DCP, UHIN

Goals/Objectives Supported: 2A, 2C, 3D

To expand clinical data exchanges between HIE, EHRs and public health programs to support population health improvements (Baseline on operational use cases = 3, Immunization, EHR, and Syndromic Surveillance). Expanding to Newborn Screening and planning for cancer registry.

20. Obesity & Diabetes Population Health

Action: Planning **Primary:** UDOH, UHIN

Goals/Objectives Supported: 2B, 2C, 2D

Baseline measures of obesity and diabetes using clinical data stream are obtained from the CHIE.

21. Behavioral Health & Primary Care Interoperability

Action: Planning **Primary:** UDOH, UHIN

Goals/Objectives Supported: 2B, 2D, 3C

Assessment of best use of interoperability between behavioral health and primary care

22. Utah Regional Health Care Innovation Day

Action: COMPLETED **Primary:** Comagine Health

Goals/Objectives Supported: 2B, 3A, 3F, 4C

The Utah Regional Health Care Innovation Day brings together health care professionals, payers, health care organizations, and state and federal government officials to discuss innovations to transform health care. During this event those working locally to improve health, provide care and lower costs through innovative strategies will share their vision, lessons learned and results. A one day planning session was held.

23. Indian Health Geographic Analysis

Action: Planning **Primary:** UDOH, UHIN

Goals/Objectives Supported: 2D, 3C

A state wide assessment of Indian health status using multiple state data bases for 3 use cases of Behavioral Health, Obesity Diabetes reduction, and End of Life care.

24. COB Database - Payer coordination

Action: Implementation **Primary:** UHIN

Goals/Objectives Supported: 2A

Working with community payers to improve the Coordination of Benefits.

25. Statewide PCORnet Collaboration for Reducing Uncontrolled Hypertension

Action: Planning **Primary:** UDOH, UHIN, Intermountain, University of Utah

Goals/Objectives Supported: 2C

UDOH collaborates with the Intermountain and the University of Utah's academic clinical databases ("PCORnet" Projects) to assist UHIN to develop a PCORnet compatible database and enable clinical information exchange among the three PCORnet's nodes. Initial clinical information to be exchanged is related to hypertension and hypertension-related diseases. This

initiative is to support the Utah Governor's Legacy Project to reduce uncontrolled hypertension in Utah.

26. Fall Prevention Initiative

Action: Planning

Primary: UDOH, UHIN

Goals/Objectives Supported: 2B, 2D, 3C

This initiative is based on legislative interest. It is to explore using EMS data to identify and alert providers/Aging Services on patients with the potential for falls so that they can follow up. This project also entails exploring ability to share information with social services agencies.

27. Shared Care Plan

Action: Planning

Primary: UDOH, UHIN, UHPP

Goals/Objectives Supported: 2B, 2D, 3C

This project is to enable sharing of care plans across disparate providers to enhance care coordination. This includes behavioral health care plans and referrals for vulnerable populations.

28. Home Health Hub

Action: Planning

Primary: UDOH, UHIN

Goals/Objectives Supported: 2B, 2D, 3C

Using HIT for Home Health Orders to increase timeliness of care. Would allow for electronic signatures on orders. A design meeting has been held.

29. Social Service Referrals – Addressing social determinants in healthcare

Action: Planning

Primary: UDOH, UHIN, United Way

Goals/Objectives Supported: 2B, 2D, 3C

Have assessments in primary care and developing the ability of primary care to refer to 211 and then having the referral report back to the provider through the CHIE.

30. Pharmacy integration medication reconciliation

Action: Planning

Primary: UHIN, Comagine Health

Goals/Objectives Supported: 2B, 2D, 3C

Integrating pharmacy data into the CHIE for medication reconciliation of non-controlled substance medication. This is related to the Cancel RX initiative.

31. State telehealth capacity for primary care and public health service delivery –

Action: planning

Primary: UDOH EPICC and MCH

Goals/Objectives Supported: 2D

Assess capacity and needed development for delivery of health care services via telehealth, focused on primary care at this time. UDOH EPICC's workplan activities include working towards establishing and expanding the use of telehealth technology to increase access to DSMES programs. Additionally staff are working with LHDs to conduct an inventory of current providers using telehealth mechanisms to provide DSMES and/or diabetes education services and explore systems/software and equipment necessary for providing DSMES telehealth services. UDOH MCH

Has a telemental health pilot contract with the University of Utah that will be extended with some legislative funding. UDOH also has a statewide safety bundle initiative that is being implemented through Project ECHO

PROJECTS FOCUSED ON ENHANCING UTAH'S INTEROPERABLE HEALTH IT INFRASTRUCTURE

32. Rural Community Connectivity to CHIE

Action: Implementation **Primary:** UHIN

Goals/Objectives Supported: 2B, 2D, 3C

Increase usage and participation in the CHIE. There has been much progress on this. There are three rural hospitals that still need to connect.

33. Bi-directional Immunization Query through CHIE

Action: Implementation **Primary:** UHIN, UDOH-USIIS

Goals/Objectives Supported: 3C, 3D

CHIE and the Utah Statewide Immunization Information System (USIIS) will develop a bi-directional immunization query through CHIE for CHIE providers to query USIIS for patient immunization histories.

34. EMS Integration exchange with CHIE

Action: Implementation **Primary:** UHIN

Goals/Objectives Supported: 3C

Create an interface for EMS providers to query for information from their patients.

35. Patient Centered Data Home - Multi-HIE Connections

Action: Implementation **Primary:** UHIN

Goals/Objectives Supported: 3C

In production with 14 states including Alabama, Arizona, Arkansas, California, Colorado, Idaho, Indiana, Kentucky, Michigan, Nebraska, Nevada, Ohio, Oklahoma, and Tennessee. In process with 7 additional states including Alaska, Iowa, Louisiana, North Dakota, Oregon, Texas, and Washington.

36. Poison Control Center Data Integration

Action: Implementation **Primary:** UHIN, UDOH

Goals/Objectives Supported: 3C

This is to get records in the hands of poison control to facilitate continuity of care. This project will work towards all referred hospitals receiving intake information gathered from the Poison Control center as well as follow up information sent back to the Poison Control Center for training and quality assessment. This is an expanded project from the initial work with St. Marks and Intermountain.

37. The Shared Identity Services for Utahns (ThSisU) / Statewide MPI

Action: Planning **Primary:** UDOH, Comagine Health

Goals/Objectives Supported: 1E, 3A, 3D, 3E

To develop a statewide and community-based identity validation services for improving quality of health services and reducing abuse, misuses, and cost. (Baseline = 0)

38. EHR, HIE connections to the Controlled Substance Database

Action: Planning **Primary:** DOPL, UDOH, UHIN

Goals/Objectives Supported: 3B, 3C, 3D

To develop connectivity among the Utah Controlled Substance Database (CSD) with EHRs, the CHIE, pharmacies to increase and improve the uses of CSD for reducing the opioids overdoses prescriptions and deaths. (Baseline = 0)

39. UHIN HIT Conference

Action: Implementation **Primary: UHIN**
Goals/Objectives Supported: 2D, 3A, 3B, 3F, 4A
Annual educational community based conference.

40. CHIE Adoption

Action: Expansion **Primary: UHIN**
Goals/Objectives Supported: 2B, 3C
Increase the usage and participation in the CHIE.

41. CHIE Connections

Action: Expansion **Primary: UHIN, UDOH**
Goals/Objectives Supported: 3C
Improved CHIE with behavioral health providers, SNF HH and EMS.

42. Statewide Stroke and Cardiac Registries

Action: Planning **Primary: UHIN, UDOH, Health Insight**
Goals/Objectives Supported: 3C, 3D
These new registries are required by recent legislation. UDOH is exploring utilizing UHIN to receive hospital reporting to the statewide stroke and cardiac registries through CHIE.

43. Statewide Standards for Data Quality

Action: Planning **Primary: UHIN, UDOH, Health Insight, ThSisU**
Goals/Objectives Supported: 2A, 3A, 3E, 4A
Establish and implement standards for health data exchanges, building on ONC's standards. Deploy tools to clean data for analytics.

44. HIE for Newborn Screenings and Follow up

Action: Need Resources **Primary: UDOH, UHIN**
Goals/Objectives Supported: 1A, 2B
To develop capacity to exchange newborn screening results and follow-up diagnostic reports between public health and providers via CHIE (Baseline = 0).

45. Physical and Behavioral Health electronic exchange - PCP to BH and BH to PCP

Action: Expansion **Primary: UHIN**
Goals/Objectives Supported: 1A, 2B
This project intends to exchange needed healthcare information between behavioral health and physical health providers. As of August 2016, UHIN is working with pediatric groups at Granger and the University Neuropsychiatric Institute. UHIN is piloting the updated SAMHSA consent with adult groups at Davis Behavioral Health.

46. Use of EHR and/or PCORnet data for chronic disease surveillance by public health

Action: Planning **Primary: UDOH-DCP, CHDI**
Goals/Objectives Supported: 3D, 3E

The Bureau of Health Promotion within DCP has been evaluating the efficacy of EHR data for chronic disease surveillance and informing public health intervention and prevention efforts.

47. Development of system to implement Medical Cannabis, including inventory control system, pharmacy, and electronic verification

Action: Planning

Primary: UDOH-Center for Medical Cannabis

Goals/Objectives Supported: 2D, 3D

The Center for Medical Cannabis is working on an RFP that will address the multiple needs to implement Medical Cannabis through an interoperable system.

48. Development of Controlled Substance Database dashboards including a provider, patient, and public dashboard

Action: Development and Implementation Primary: UDOH, DOPL

Goals/Objectives Supported: 2D, 3D

UDOH is working with DOPL to create dashboards to inform providers of patient history with opioids, opioid/benzodiazepine combinations, and their own prescribing practices. They are also creating a public dashboard to identify hotspot areas.

PROJECTS FOCUSING ON INNOVATION AND APPLIED RESEARCH TO EFFICIENTLY IMPLEMENT STATEWIDE HEALTH IT INITIATIVES

49. Utah Partnership for Value

Action: Expansion

Primary: Comagine Health

Goals/Objectives Supported: 4A, 4B

The Utah Partnership for Value-driven Health Care (UPV) operates under a collaborative, member-driven process. Partners come to the table to identify needed changes to the health care system. The work of the UPV is accomplished through member-led workgroups related to topics and initiatives identified by the collaborative.

50. Provider Directory

Action: Implementation

Primary: UHIN, UDOH-HIP

Goals/Objectives Supported: 4A

To develop interoperable health professional directories among providers, payers, HIE and UDOH to support secured message exchanges, patient-provider mapping, clinic-level intervention, etc. (Baseline = 0)

51. Stakeholder Engagement (ie. Indian Health)

Action: Implementation

Primary: UHIN, UDOH, Tribal Epidemiology Centers

Goals/Objectives Supported: 4B

Improved connections for Indian Health providers for information exchange and population health management.

52. Partnering for Better Health Research Conference

Action: Need Resources

Primary: Comagine Health

Goals/Objectives Supported: 4A

Intermountain Healthcare, Comagine Health, University of Utah Center for Clinical and Translational Sciences, and Community Faces of Utah host an innovative conference to improve UT patient engagement and patient centered outcomes research. Participants will engage in breakout sessions to address health sciences research questions as well as provide community member input into research design, inquiry and ongoing participation.

53. Highlights of ongoing transparency, quality or research projects or All Payer Claims Database (APCD) use cases (e.g., UDRC

Action: Implementation Primary: UDOH

Goals/Objectives Supported: 4A

Yearly showcase events, products or publications highlighting new transparency, quality, or research projects. The Office of Healthcare Statistics shares new or updated uses of APCD data.

Measures

The Digital Health Service Commission will establish measures and a reporting dashboard to review progress on the projects in this plan.

Appendix A – Acronym List

ACO – Accountable Care Organization

ADT – Admissions, Discharges, and Transfers electronic HL7 messages

APCD – All Payer Claims Database

CHIE – Clinical Health Information Exchange. Utah's HIE.

EHR – Electronic Health Records

ePOLST – Electronic Physician's Orders for Life-Sustaining Treatment

HIE – Health Information Exchange

HIT – Health Information Technology

HITECH - Health Information Technology for Economic and Clinical Health

HL7 – Health Level-7 are international standards for transfer of clinical and administrative health data between software applications.

IT - Information Technology

MACRA – Medicare Access and CHIP Reauthorization Act

MU – Meaningful Use

NQF – National Quality Forum

OHCS – Office of Healthcare Statistics

OVRS – Office of Vital Records and Statistics

PCORI – Patient-Centered Outcomes Research Institute

PFAC - Comagine Health's Patient & Family Advisory Council

PQRS – Physician Quality Reporting System

UDOH – Utah Department of Health

UHIN - Utah Health Information Network

UPV – Utah Partnership for Value-driven Health Care

USIIS – Utah Statewide Immunization Information System

Appendix B – Completed Projects

1. Choosing Wisely Campaign (informed patient)

Action: COMPLETED

Primary: Comagine Health

Related Goals/Objectives: 1A

Choosing Wisely Utah is a statewide campaign focused on encouraging physicians, patients, and other health care stakeholders to think and talk about medical tests and procedures that may be unnecessary, and in some instances cause harm. Current efforts are using community navigators to improve newly-insured patient-understanding of how to use the health care system and avoiding unneeded care.

2. All Payer Claims Database (APCD) Showcase Event

Action: COMPLETED

Primary: Comagine Health, UDOH-OHCS

Goals/Objectives Supported: 4A

Yearly the Office of Healthcare Statistics and Comagine Health Partner to show the research abstracts that are coming from use of APCD data. Presenting and sharing success and barriers of the APCD data is a learning event for academic, public health, and healthcare improvement organizations.